D.C. OFFICE OF PROPERTY MANAGEMENT ACCEPTED PROPOSAL TO LEASE SPACE

IN RESPONSE TO RFP / LEASE NO.→

DATED - -

			SECTION I	- DES	CRIPT	ION O	F PRE	EMISES				
1a. BUILDING NAME					2a	.FLOORS OFFEREI)	3. TOTAL RENTABLE SPACE				
1b. BUILDING ADDRESS					2b	.TOTAL NUMBER FLOORS BUILDING	IN	a. GENERAL PURPOSE (Office) sq. ft.		b. WAREHOU	SE	c. OTHER
1c. CITY Washington 1d. STA DC			TE		4.	4. LIVE FLOOR LOAD		5. MEASUREN METHOD	MENT	6. YEAR OF LA MAJOR RENOVATIO (if applicable	ON	7. BUILDING AGE
1e. 9-DIGIT ZIP CODE 1f. DIST			STRICT WARD	RICT WARD Ibs. / sq. ft.			t.	ANSI/BOM/ OTHER	[] A			
		,	SECTION II -	SPAC	CE OF	FERE) AND	RATES				
		ANSI/BOMA	DMA BENEVE		MON	INITI		IAL TERM		9. SPACE BUILDOU		T & AMORTIZATION
8.		OFFICE AREA SQUARE FEET (1)	RENTABLE SQUARE FEET (2)	ARI FACT	EA FOR	PER (RENT	. RATE YEAR ABLE) 4)	TOTAL ANN AMOUN (2) x (4) (5)	T			DOLLAR AMOUNT
	a. ANNUAL RENTAL Full Service Lease	ANNUAL RENTAL		(0	<i>'</i>	(-	")	(3)		a. TOTAL BUILDOUT		\$
	b. OPERATING COSTS (SERVICE COSTS)	(Refer to Line 27 o	DC OPM Form L-101)			\$		0		b. SHELL BUILDOUT (Per requirements in SFO)		\$
	c. CURRENT REAL Include in Shell Rent and Provide Current (Refer to Line 28 on DC OPM Form L-101)				ear Statement					c. TENANT IMPROVEMEI (Per requirements in SFO)		(Excluding 9b requirements) \$
	d. AMORT. OF TENANT IMPROVEMENTS	(Complete items 9a thru 10)				[10 divided by 8a(2,		2)] (see 10) \$		d. AMORT. RATE		%
	e. SHELL RENTAL	8a(5) minus sum of [8b(5) and 8d(5)]				\$		\$		e. AMORT. TERM		MONTHS
	Note: When multiplying minimize the rounding e	2, it may not equal co	nay not equal column 5, due to rounding. T				ng. The Offeror is encouraged to			f. AMORT. OF TENANT IMPROVEMENTS (Use 9c as base)		
11.	Tenant Improvements shall be all alterations for the Government-demised area above the building shell build out. The Tenant Improvement Allowance as stated under Block 9c is not included in the shell rent. It is expected that the tenant build out will be fully amortized at the end of the firm term and the rent reduced accordingly. Any desired rent increases or decreases should be reflected in the shell rent and fully explained as part of this written proposed. If tenant improvements are to be amortized. [MPROVEMENTS]											
12.	beyond the firm term, so COMMISSIONS a. Tenant Representat	aid calculations will b		proposal.	eal.				ments:		(per year)	
	%	%				% at lease award and/or				% at lease occupancy		
13.	a. Number of parking spaces for the entire building/facility, which are under the control of the Offeror: b. Number of parking spaces for Official Government Vehicles (per SFO): Annual cost per space:				nent	c. Number of parking spaces for Employee/Visitor Use: Annual cost per space:					\$	
	the Offeror: Annual cost per space: Number required by local code: SECTION III - LEASE TERMS AND CONDITIONS											
14. INITIAL LEASE TERM 15. RENEWAL OPTIONS												
a. N	UMBER OF YEARS b.	(Full Term) YEARS FIRM	c. NUMBER OF NOTICE REFOR GOVERNME TERMINATE LEASE:	QUIRED ENT TO		ELL RATE F / YR	/ b.	YEARS EACH	C.	NUMBER OF OPTIONS		NUMBER OF DAYS NOTICE REQUIRED TO EXERCISE RENEWAL OPTION:
d. LEASE COMMENCEMENT DATE:									1			

16. OFFER GOOD UNTIL AWARD		Space will be altered and de specifications and requirement Request for Proposals and a	livered in accordance with the Government's ents in accordance with the Solicitation of Offers / any additional attachments.					
18. LIST OF ATTACHMENTS SUBMITTED WITH THIS OFFER (See Solicitation / Request for Proposals requirements)								
19. ADDITIONAL REMARKS OR CONDITIONS WITH F	RESPECT TO THIS OFFER (See)	Section 11 of DC OPM Form L-104	describing Lessor provided services)					
		FICATION AND CERT						
20. RECORDED OWNER (Name and address including	g ZIP code)							
21. BY SUBMITTING THIS OFFER, THE OFFEROR A	GREES UPON ACCEPTANCE OF							
COLUMBIA, THE PREMISES DESCRIBED, UPON AFOREMENTIONED SOLICITATION OF OFFERS			LL COMPLIANCE WITH AND ACCEPTANCE OF THE					
22. OFFEROR'S INTEREST IN PROPERTY	OWNER	AGENT	OTHER (Specifv):					
	[]	[]						
23. OFFEROR								
a.			b. E-MAIL ADDRESS:					
			c. TELEPHONE NUMBER (Including area code)					
d. SIGNATURE			e. DATE SIGNED					

PAGE 2 OF 2 DC OPM FORM L-102TIA (12/2007)